OIPE VOI							
SEP 1 & 2004 W							
La Carrier				Application No.		10/618,285	
TRANSMITTAL				Filing Date		July 11, 2003	
TRANSMITTAL				First Named Inventor		SCHWIETERS, et al.	
FORM				Examiner Name		Hashmi, Zia R.	
(to be used for all correspondence after initial filing)				Group Art Unit		2881	
Total Nun	nber of Pages in This Submissi	on	7	Attorney Docket No.		A-72356/AJT (466984-22)	
			ENCLOSURES (check all the			it apply)	
\boxtimes	Amendment Fee Transmittal Form		Assignmen (for an App			After Allowance Communication to Group	
\boxtimes	Fee Attached		Drawing(s)			Appeal Communication to Board of Appeals and Interferences	
\boxtimes	Amendment / Reply		Licensing-r	related Papers		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
	Final Office Action		Petition			Proprietary Information	
	Affidavits/declaration(s)		Petition to Convert to a Provisional Application			Status Letter	
\boxtimes	Extension of Time Request One Month		Power of Attorney, Revocation Change of Correspondence Address		\boxtimes	Other Enclosure(s) (please identify below):	
	Express Abandonment Request		Terminal Disclaimer			Check in the amount of \$110.00 for one-month extension of time; and a Return Postcard	
	Information Disclosure Statement		Request for Refund				
	Certified Copy of Priority Document(s)			CD(s)			
Response to Missing Parts/ Incomplete Application			Remarks				
Response to Missing Parts under 37 CFR 1.52 or 1.53							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Aldo J. Test, Reg. No. DORSEY & WHITNEY 4 Embarcadero Cente or Individual name Signature			te 3400	Cus	stomer I	Number 32940	
Signature Date Augus 2004							
CERTIFICATE OF MAILING							
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with Sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: 8/30 / 04							
Typed or printed name Leslie Hoffmann							

Signature

August <u>30</u>, 2004

Date